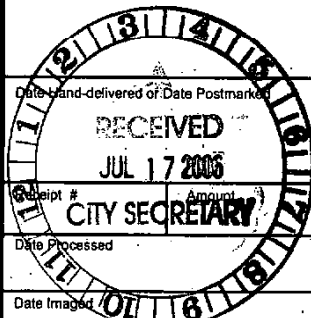


**SPECIFIC-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT****FORM SPAC  
COVER SHEET PG 1**

<b>The SPAC INSTRUCTION GUIDE explains how to complete this form.</b>		<b>1 ACCOUNT #</b> (Ethics Commission filers) 88888888	<b>2 PAGE #</b> 1 of 29
<b>3 COMMITTEE NAME</b> The Carol Alvarado Legal Fund		<b>OFFICE USE ONLY</b>	
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address	<b>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE</b> 816 Ralfallen Houston, TX 77008		
<b>5 CAMPAIGN TREASURER NAME</b>	<b>MS / MRS / MR FIRST MI</b> Mr. Albert  <b>NICKNAME LAST SUFFIX</b> AL Luna		
<b>6 CAMPAIGN TREASURER'S STREET ADDRESS</b> (Residence or business)	<b>STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE #; CITY; STATE; ZIP CODE</b> 3000 Wesleyan, #330 Houston, TX 77027		
<b>7 CAMPAIGN TREASURER'S MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	<b>STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE</b> 3000 Wesleyan, #330 Houston, TX 77027		
<b>8 CAMPAIGN TREASURER PHONE</b>	<b>AREA CODE PHONE NUMBER EXTENSION</b> (713) 624-1060		
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
<b>10 PERIOD COVERED</b>	<b>Month Day Year</b> 04/04/2006 THROUGH 06/30/2006		
<b>11 ELECTION</b>	<b>ELECTION DATE</b> Month Day Year	<b>ELECTION TYPE</b> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>GO TO PAGE 2</b>			

**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE & TOTALS****FORM SPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> The Carol Alvarado Legal Fund		<b>ACCOUNT #</b> (Ethics Commission filers) 88888888	
<b>13 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input checked="" type="checkbox"/> <b>ASSIST</b> (Officeholder only)	<input type="checkbox"/> <b>CANDIDATE</b>   <input checked="" type="checkbox"/> <b>OFFICEHOLDER</b>	<b>CANDIDATE / OFFICEHOLDER NAME</b> Carol Alvarado  <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b> Houston City Council Dist. I	
	<input type="checkbox"/> <b>MEASURE</b>	<b>BALLOT IDENTIFICATION / #</b> <span style="float: right;"><b>ELECTION DATE</b> Month Day Year</span>	
		<b>DESCRIPTION</b>	

<b>14 CONTRIBUTION TOTALS</b>	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 56,475.00
<b>EXPENDITURE TOTALS</b>	3.	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 10,000.00
<b>CONTRIBUTION BALANCE</b>	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 46,475.00
<b>OUTSTANDING LOAN TOTALS</b>	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**15 AFFIDAVIT**  
  

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE  
  
 Sworn to and subscribed before me, by the said ALBERT LUNA III, this the 17TH day of JULY, 2006, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

NOTARY PUBLIC  
 Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/26 Report: 3/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  05/24/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Allen Boone Humphries Robinson LLP  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alvarado, Ida  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/17/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alvarado, Norma  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alvarado, Yolanda  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/13/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alvarez, Ruben  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/26 Report: 4/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date 05/02/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Arnold, Daniel	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code [REDACTED]			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 06/12/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Art Contreras & Associates	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/16/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Badger, Richard	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/03/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Barbosa, George	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/23/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bass, Everett	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1 PAGE #</b> Schedule: 3/26 Report: 5/29	
<b>2 FILER NAME</b> The Carol Alvarado Legal Fund		<b>3 ACCOUNT #</b> (Ethics Commission filers) 88888888	
<b>4 Date</b>  06/20/2006	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Bernback, Michael  <b>6 Contributor address; City; State; Zip Code</b> [REDACTED]	<b>7 Amount of contribution (\$)</b>  \$1,000.00	<b>8 In-kind contribution description (if applicable)</b>
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b>  06/04/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Blanco, Blanca  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  06/04/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Booth, Barbara  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$30.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  06/04/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Bostic, Jacqueline  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$50.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  06/04/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Bradford, Sally  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$75.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/26 Report: 6/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/02/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brady, Gerald  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/01/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brkovich, Robert  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Burney and Foreman  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/10/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cavazos, M. Helen  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/13/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Clark, Melba  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$40.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/26 Report: 7/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/13/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Clifford, Cindy  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/23/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Coello, Maria  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/21/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Coleman, Garnet  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Collins, David  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$400.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/05/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Colon, Edgardo  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/26 Report: 8/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/03/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Davila, Abel  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/13/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Davis, Father Bill  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) De La Fuente, S. (Mrs.)  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/20/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Delibero, Shirley  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Diaz, Yvette  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1 PAGE #</b> Schedule: 7/26 Report: 9/29	
<b>2 FILER NAME</b> The Carol Alvarado Legal Fund		<b>3 ACCOUNT #</b> (Ethics Commission filers) 88888888	
<b>4 Date</b>  05/21/2006	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Dieterle, Clifford  <b>6 Contributor address; City; State; Zip Code</b> [REDACTED]	<b>7 Amount of contribution (\$)</b>  \$250.00	<b>8 In-kind contribution description (if applicable)</b>
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b>  06/09/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Dora F. Olivo Law Offices  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  04/20/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Drake, Jack  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$200.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  05/12/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Drexler, Clyde  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$1,000.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  04/20/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Eichhorn, Ardis  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$25.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 8/26 Report: 10/29	
<b>2</b> FILER NAME The Carol Alvarado Legal Fund		<b>3</b> ACCOUNT # (Ethics Commission filers) 88888888	
<b>4</b> Date 06/23/2006	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Estrada, Catherine	<b>7</b> Amount of contribution (\$) \$100.00	<b>8</b> In-kind contribution description (if applicable)
<b>6</b> Contributor address; City; State; Zip Code [REDACTED]			
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date 06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Flores, Dionicio	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/05/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Flores, Steven	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/03/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Flores, Teresa	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/17/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fortson, Stanley	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code [REDACTED]			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 9/26 Report: 11/29

**2** FILER NAME The Carol Alvarado Legal Fund**3** ACCOUNT # (Ethics Commission filers)

88888888

**4** Date**5** Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Fowler, Michael**7** Amount of  
contribution (\$)**8** In-kind contribution  
description (if applicable)

05/30/2006

**6** Contributor address; City; State; Zip Code  
[REDACTED]

\$100.00

**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Garcia, RichardAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

06/04/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Garver, MikeAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

04/14/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Garza, OliviaAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

05/22/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Gomez, MichaelAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

06/04/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/26 Report: 12/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/04/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hageney, Chris  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/20/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Handel, Mark  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/23/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hays, Susan  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/28/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hebert, John Russel  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/25/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Holmes, Ned  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 11/26 Report: 13/29

**2** FILER NAME The Carol Alvarado Legal Fund**3** ACCOUNT # (Ethics Commission files)

88888888

**4** Date**5** Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Huff, Richard**7** Amount of  
contribution (\$)**8** In-kind contribution  
description (if applicable)

05/11/2006

**6** Contributor address; City; State; Zip Code  
[REDACTED]

\$500.00

**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Hulsey, JessicaAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

06/04/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
I.B.E.W. - COPEAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

05/01/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Ibarra, MickeyAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

06/17/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
IKE EnterprisesAmount of  
contribution (\$)In-kind contribution  
description (if applicable)

06/02/2006

Contributor address; City; State; Zip Code  
[REDACTED]

\$50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1 PAGE #</b> Schedule: 12/26 Report: 14/29	
<b>2 FILER NAME</b> The Carol Alvarado Legal Fund		<b>3 ACCOUNT #</b> (Ethics Commission filers) 88888888	
<b>4 Date</b>  06/03/2006	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Jordan, Janis  <b>6 Contributor address; City; State; Zip Code</b> [REDACTED]	<b>7 Amount of contribution (\$)</b>  \$25.00	<b>8 In-kind contribution description (if applicable)</b>
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b>  06/04/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Jozwiak, Michael  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$40.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  06/04/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Kaylor, Debra  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$20.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  06/04/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Kaylor, Elisa  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$75.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  06/30/2006	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC(ID# _____) Kelsch, Cynthia  <b>Contributor address; City; State; Zip Code</b> [REDACTED]	<b>Amount of contribution (\$)</b>  \$250.00	<b>In-kind contribution description (if applicable)</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 13/26 Report: 15/29	
<b>2</b> FILER NAME The Carol Alvarado Legal Fund		<b>3</b> ACCOUNT # (Ethics Commission filers) 88888888	
<b>4</b> Date  05/18/2006	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Laboon, Bruce  <b>6</b> Contributor address; City; State; Zip Code [REDACTED]	<b>7</b> Amount of contribution (\$)  \$500.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  04/20/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lau, Clayton  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/01/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Linton, Melaney  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/18/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Locke Liddell & Sapp  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/26/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Longoria, Janiece  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/26 Report: 16/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  04/18/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lopez, Arthur  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lopez, James  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/18/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Luna, Al  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/02/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mannchen, Brandt  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Marron, John  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/26 Report: 17/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/02/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martinez, Roman  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/01/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McBride, Gray  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McLane, Drayton  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/02/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Medrano, Jose  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/15/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Melchor, Max  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/26 Report: 18/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/04/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mindiola, Tatcho  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/13/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Molera, Jaime  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/11/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Molera, Manny  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/20/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Montes, Richard  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/16/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Morales, Terry  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/26 Report: 19/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/18/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Moreno, Frank Jr.  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Morian, Sallie  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/05/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Moya, Olga  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/23/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Murguia, Janet  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/20/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Newhard, Shirley  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$5.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/26 Report: 20/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/23/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ocanas, Gilberto  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/18/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Paisano Interests  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Partida, Neftali  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/11/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Patout, Rivers (Father)  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pena, Emilio  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/26 Report: 21/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/02/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Perez, Andrew  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See instructions)		10 Employer (See instructions)	
Date  04/24/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Perry, Bob  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date  04/24/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Perry, Doyleene  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date  05/11/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Plumbers Local Union No 68  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date  05/08/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Quijano, Nelly  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See instructions)		Employer (See instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/26 Report: 22/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  05/01/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rash, Jeanette  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/05/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rash, Jeanette  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reyes, Richard  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$30.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/19/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Saenz, Gracie  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/21/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Saggau & Derollo LLC  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/26 Report: 23/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/04/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# Santillan, Suzy  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/01/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# Saperstein, David  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/22/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# Sera, Carlos  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# Shaw, Ellen Stupak  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# Shaw, Richard  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22/26 Report: 24/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  05/30/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sheetmetal Workers LU #54 PAC Fund  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/22/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shirakawa, George  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/02/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Singh, Varinder  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/10/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Smith, Brian G.  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/17/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Smith, J. Brian  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/26 Report: 25/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/04/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sosa, Maria Carmen  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions).		10 Employer (See Instructions)	
Date  06/20/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Spiegel, David  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$2,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/24/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stein, Martha  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/12/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stewart, Steve  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stout, Bob  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/26 Report: 26/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/04/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Taylor, William  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/23/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Texas Working Families PAC  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/23/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Torres, Gerard  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/25/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Valdez, Esther  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/05/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vara, Danny  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/26 Report: 27/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  06/04/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vara, Richard  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$45.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/30/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Villareal, Lillian  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/15/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vinson & Elkins Texas  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  04/13/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wallace, Judy  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/12/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wells, Mark  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/26 Report: 28/29	
2 FILER NAME The Carol Alvarado Legal Fund		3 ACCOUNT # (Ethics Commission filers) 88888888	
4 Date  04/15/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wilson, Debra  6 Contributor address; City; State; Zip Code [REDACTED]	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wilson, Debra  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/30/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wulfe, Edmond  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/03/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Young, Phillipa  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/04/2006	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Zermeno, Roy  Contributor address; City; State; Zip Code [REDACTED]	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/1 Report: 29/29**2** FILER NAME The Carol Alvarado Legal Fund**3** ACCOUNT # (Ethics Commission filers)  
88888888**4** Date

05/10/2006

**5** Payee name  
Rusty Hardin and Associates**6** Payee address; City; State; Zip Code

Houston, Texas

P.O. Box 12070

**7** Amount  
(\$)

\$10,000.00

**8** Purpose of payment (See instructions regarding type of  
information required.)  
Legal Services**9** \*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name:Office sought:  
Office held: